

06-16-05
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026418 7590 03/14/2005

REED SMITH, LLP
ATTN: PATENT RECORDS DEPARTMENT
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| |
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| (Depositor's name) |
| (Signator) |
| (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/950,038 | 09/10/2001 | Eitan Zait | 22868.49 | 8658 |

TITLE OF INVENTION: METHOD AND APPARATUS FOR THE MANUFACTURING OF RETICLES 06/17/2005 HBERHE1 00000017 09950038

| | |
|------------|-----------|
| 01 FC:2501 | 700.00 OP |
| 02 FC:1504 | 300.00 OP |
| 03 FC:8001 | 30.00 OP |

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | YES | \$700 | \$300 | \$1000 | 06/14/2005 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|----------------------|----------|----------------|
| ANGEBRANDT, MARTIN J | 1756 | 430-005000 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 363).

- ☒ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 WILLIAM H. DIPPERT
2 WOLF, BLOCK, SHARR
AND SOLIS-COHEN LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

U-C-LASER LTD.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

KARMIEL, ISRAEL

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
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- ☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

William H. Dippert

Date

JUNE 14, 2005

Typed or printed name

WILLIAM H. DIPPERT

Registration No.

26,723

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